

Measure Description

Children six-12 years of age newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least **three** follow-up care visits within a 300-day (10-month) period, one of which was within 30 days of when the first ADHD medication was dispensed. Children must be six years old as of March 1, 2024, to 12 years old as of February 28, 2025.

Initiation Phase: Children with a prescription dispensed for ADHD medication, who had **one** follow-up visit with a prescribing provider during the 30-days following the Index Prescription Start Date (IPSD). A visit on the IPSD cannot be counted as the Initiation Phase visit. Telehealth and telephone visits count for this phase.

Continuation & Maintenance (C&M) Phase: Children with a prescription dispensed for ADHD medication, who remained on the medication for at least 210 days and who, in addition to the visit during the Initiation Phase, had at least **two** follow-up visits with a provider within 270 days (nine months) after the Initiation Phase ended. Telehealth, telephone visits, e-visits, or virtual check-ins count for this phase.

Definitions

Measurement Period: January 1, 2025 – December 31, 2025

Intake Period: The 12-month window starting March 1, 2024 and ending February, 28 2025.

Negative Medication History: A period of 120 days prior to the IPSD when the Member had no ADHD medications dispensed for either new or refill prescriptions.

Index Prescription Start Date (IPSD): The earliest prescription dispensing date for an ADHD medication where the date is in the Intake Period and there is a Negative Medication History.

Continuous Medication Treatment: The number of medication treatment days during the 301-day period must be ≥ 210 days (ex. 301 treatment days minus 91 gap days).

Treatment Days (covered days): The actual number of calendar days covered with prescriptions within the specified 301-day period.

ADHD Medications

CNS Stimulants	Dexmethylphenidate, Dextroamphetamine, Lisdexamfetamine, Methylphenidate, Methamphetamine
Alpha-2 Receptor Agonists	Clonidine, Guanfacine
Miscellaneous ADHD Medications	Atomoxetine, Viloxazine

Initiation Phase

Children with a prescription dispensed for ADHD medication, who had one follow-up visit with a provider with prescribing authority 30 days after the IPSP. A visit on the IPSP cannot be counted as an Initiation Phase visit.

Any of the following code combinations billed by a prescribing provider meets the criteria:

Outpatient Visit with Outpatient Place of Service	Visit Setting Unspecified CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99252, 99253, 99254, 99255 Outpatient POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 71, 72
Behavioral Health Outpatient Visit	CPT: 98960, 98961, 98962, 99078, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99341, 99342, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99483, 99492, 99493, 99494, 99510 HCPCS: G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, T1015 SNOMED: 50357006, 77406008, 84251009, 86013001, 90526000, 185463005, 185464004, 185465003, 209099002, 281036007, 391223001, 391224007, 391225008, 391233009, 391237005, 391239008, 391242002, 391257009, 391260002, 391261003, 439740005, 866149003, 3391000175108, 444971000124105, 456201000124103 UBREV: 0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0900, 0902, 0903, 0904, 0911, 0914, 0915, 0916, 0917, 0919, 0982, 0983

Health and Behavior Assessment or Intervention	CPT: 96156, 96158, 96159, 96164, 96165, 96167, 96168, 96170, 96171
Intensive Outpatient Encounter or Partial Hospitalization with Partial Hospitalization Place of Service	Visit Setting Unspecified CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99252, 99253, 99254, 99255 With POS code: 52
Partial Hospitalization or Intensive Outpatient Encounter	HCPCS: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485
	SNOMED: 7133001, 305345009, 305346005, 305347001, 391038005, 391042008, 391043003, 391046006, 391047002, 391048007, 391054008, 391055009, 391056005, 391133003, 391150001, 391151002, 391152009, 391153004, 391170007, 391185001, 391186000, 391187009, 391188004, 391191004, 391192006, 391194007, 391195008, 391207001, 391208006, 391209003, 391210008, 391211007, 391228005, 391229002, 391232004, 391252003, 391254002, 391255001, 391256000
	UBREV: 0905, 0907, 0912, 0913
Community Mental Health Center Visit with Community Mental Health Center Place of Service	Visit Setting Unspecified CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99252, 99253, 99254, 99255 With POS code: 53
Telehealth Visit with Telehealth Place of Service	Visit Setting Unspecified CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99252, 99253, 99254, 99255 Telehealth POS: 02, 10
Telephone Visit	CPT: 98966, 98967, 98968, 99441, 99442, 99443
	SNOMED: 185317003, 314849005, 386472008, 386473003, 401267002

C&M Phase

Children with a prescription dispensed for ADHD medication and meet all the following criteria:

1. Remained on the medication for at least 210 days.
2. Had at least one follow-up visit during the Initiation Phase.
3. Had two follow-up visits on different dates of service within nine months after the 30-day Initiation Phase ended.
The visits must occur 31 through 300 days following the IPSD. Only one of the two follow-up visits may be an e-visit or virtual check-in.

Reminders

- For Members who have multiple overlapping prescriptions, count the overlap days once toward the day's supply, whether the overlap is for the same drug or a different drug
- Prescribing providers are those with prescribing privileges, including nurse practitioners, physician assistants, and other non-MD's who have the authority to prescribe medications

Any of the following code combinations identify follow-up visits:

Outpatient Visit with Outpatient Place of Service	Visit Setting Unspecified CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99252, 99253, 99254, 99255 Outpatient POS: 03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 71, 72
Behavioral Health Outpatient Visit	CPT: 98960, 98961, 98962, 99078, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99341, 99342, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99483, 99492, 99493, 99494, 99510 HCPs: G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, T1015

Behavioral Health Outpatient Visit (cont.)	SNOMED: 50357006, 77406008, 84251009, 86013001, 90526000, 185463005, 185464004, 185465003, 209099002, 281036007, 391223001, 391224007, 391225008, 391233009, 391237005, 391239008, 391242002, 391257009, 391260002, 391261003, 439740005, 866149003, 3391000175108, 444971000124105, 456201000124103
	UBREV: 0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0900, 0902, 0903, 0904, 0911, 0914, 0915, 0916, 0917, 0919, 0982, 0983
Health and Behavior Assessment or Intervention	CPT: 96156, 96158, 96159, 96164, 96165, 96167, 96168, 96170, 96171
Intensive Outpatient Encounter or Partial Hospitalization with Partial Hospitalization Place of Service	Visit Setting Unspecified CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99252, 99253, 99254, 99255 With POS Code: 52
Intensive Outpatient Encounter or Partial Hospitalization	HCPCS: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485
	SNOMED: 7133001, 305345009, 305346005, 305347001, 391038005, 391042008, 391043003, 391046006, 391047002, 391048007, 391054008, 391055009, 391056005, 391133003, 391150001, 391151002, 391152009, 391153004, 391170007, 391185001, 391186000, 391187009, 391188004, 391191004, 391192006, 391194007, 391195008, 391207001, 391208006, 391209003, 391210008, 391211007, 391228005, 391229002, 391232004, 391252003, 391254002, 391255001, 391256000
	UBREV: 0905, 0907, 0912, 0913
Community Mental Health Center Visit with Community Mental Health Center Place of Service	Visit Setting Unspecified CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99252, 99253, 99254, 99255
	Community Mental Health Center POS: 53

Telehealth Visit with Telehealth Place of Service	Visit Setting Unspecified CPT: 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99252, 99253, 99254, 99255 Telehealth POS: 02, 10
Telephone Visit	CPT: 98966, 98967, 98968, 99441, 99442, 99443
	SNOMED: 185317003, 314849005, 386472008, 386473003, 401267002
e-Visit or Virtual Check-in	CPT: 98970, 98971, 98972, 98980, 98981, 99421, 99422, 99423, 99457, 99458
	HCPCS: G0071, G2010, G2012, G2250, G2251, G2252
The following will exclude Members from this measure:	
Narcolepsy Diagnosis Any Time in the Member's History Through December 31, 2025 (Do not include laboratory claims with POS code 81).	ICD10: G47.411, G47.419, G47.421, G47.429
	SNOMED: 60380001, 193042000, 427426006, 735676003, 91521000119104, 434241000124107, 434251000124109, 434261000124106
Hospice Encounter During 2025	HCPCS: G9473, G9474, G9475, G9476, G9477, G9478, G9479, Q5003, Q5004, Q5005, Q5006, Q5007, Q5008, Q5010, S9126, T2042, T2043, T2044, T2045, T2046
	SNOMED: 183919006, 183920000, 183921001, 305336008, 305911006, 385765002
	UBREV: 0115, 0125, 0135, 0145, 0155, 0235, 0650, 0651, 0652, 0655, 0656, 0657, 0658, 0659
Hospice Intervention During 2025	CPT: 99377, 99378
	HCPCS: G0182
	SNOMED: 170935008, 170936009, 385763009
Members who died any time during 2025	

Tips and Best Practices to Help Improve Performance

- Utilize the monthly Gaps in Care Report (GIC) for a list of MVP Members and the services they still need
- Educate the parent/guardian and child in simple language about the medication and potential side effects; discuss how they should respond if side effects do occur
- Ensure the parent/guardian understands how the medication should be administered
- Discuss the follow-up visit plan with the parent/guardian and child; ensure that the first follow-up visit occurs within 30 days following the prescribed date
- Once the child has the initial follow-up visit, schedule the additional two follow-up visits within nine months after the IPSP
- Encourage a Parent/Teacher conference and include the school nurse; use of the Vanderbilt Assessment Scale may be helpful during follow-up visits to assess response to the medication
- Assess need for referral to ancillary providers

American Academy of Child & Adolescent Psychiatry (AACAP) Practice Parameter for the Assessment and Treatment of Children and Adolescents with ADHD:

- **Recommendation 6:** A well-thought-out and comprehensive treatment plan should be developed for the Member with ADHD. The treatment plan should be reviewed regularly and modified if the Member's symptoms do not respond.
- **Recommendation 9:** During a psychopharmacological intervention for ADHD, the Member should be monitored for treatment-emergent side effects.
- **Recommendation 12:** Members should be assessed periodically to determine whether there is continued need for treatment or if symptoms have remitted. Treatment of ADHD should continue as long as symptoms remain present and cause impairment.

American Academy of Pediatrics Clinical Practice Guideline for the Diagnosis, Evaluation and Treatment of ADHD in Children and Adolescents:

- **Action Statement 4:** The primary care provider should recognize ADHD as a chronic condition and, therefore, consider children and adolescents with ADHD as children and youth with special health care needs. Management of children and youth with special health care needs should follow the principles of the chronic care model and the medical home.